Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.
14-20-6-3-2034

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Navajo "F"

9. WELL NO.
148

10. FIELD AND POOL, OR WILDCAT
Horseshoe Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 9 - T31N - R 17W

12. COUNTY OR PARISH
SanJuan

13. STATE
New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT —" for such proposals.)

1. OIL WELL [ ] GAS WELL [ ] OTHER

2. NAME OF OPERATOR
Hicks Enco, Inc.

3. ADDRESS OF OPERATOR
2313 Santiago, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1200' from East line and 1410' from North line

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5221 Ground

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS X	(Other)	
(Other)		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Change surface pipe from 60' to 90'. Circulate cement to surface.
The formation on the surface is the Mancos

18. I hereby certify that the foregoing is true and correct

SIGNED J. D. Hicks TITLE PRESIDENT DATE 11-7-79

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY: TITLE DATE

NMOCC

*See Instructions on Reverse Side